

Protecting and improving the nation's health

Routes to diagnosis 2015 update: sarcoma: bone cancer

National Cancer Intelligence Network Short Report

Introduction

The routes to diagnosis (RtD) study has been updated to include all patients diagnosed between 2006 and 2013, covering 2 million newly diagnosed tumours. The methodology has remained the same as in previous RtD publications. Results have been published for 57 cancer sites in workbooks that can be found at the following link www.ncin.org.uk/publications/routes to diagnosis.

Key messages

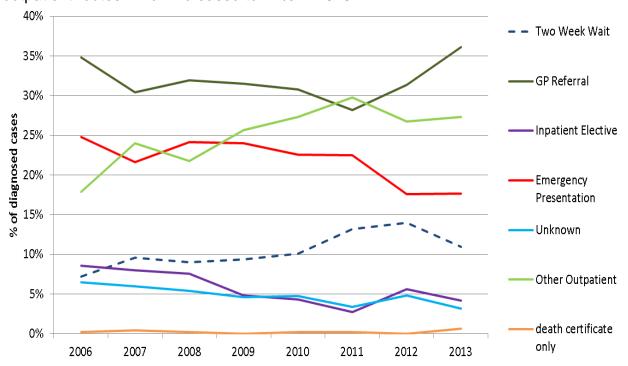
New data published for sarcoma: bone cancer.

The data shows variation by route over time, by sex, age, deprivation and also variation in survival.

This briefing describes the national RtD results for sarcoma: bone cancer. The definition used for this briefing is ICD10 C40-C41. It includes variation in routes over time, by sex, age, deprivation and variation in survival by time.

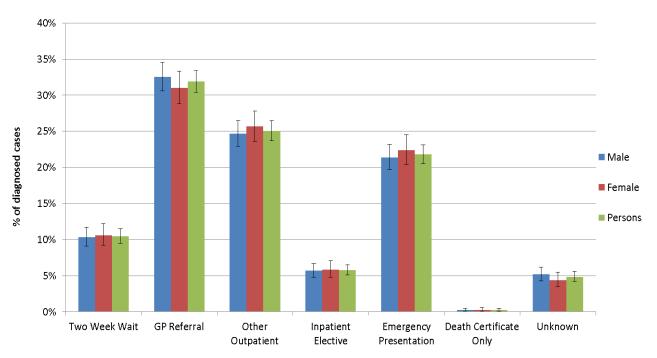
Summary of RtD for sarcoma: bone cancer

GP referral is the commonest route accounting for 36% in 2013. This is followed by other outpatient routes which increased to 27% in 2013.

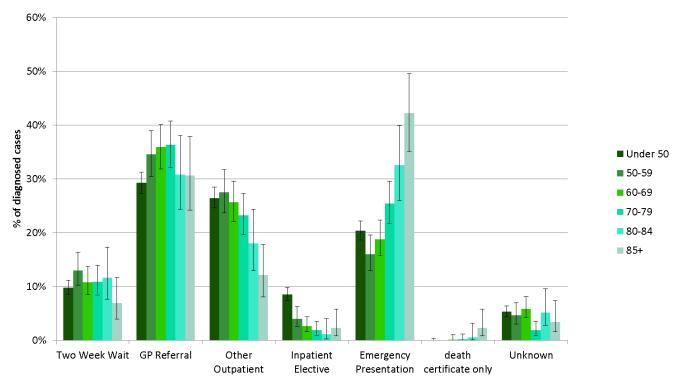


Route breakdowns for sarcoma: bone cancer, 2006 to 2013

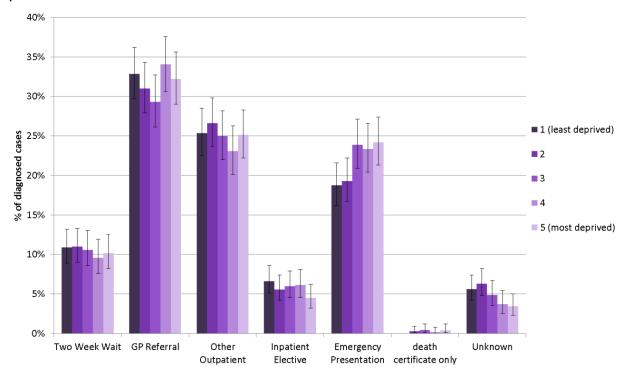
Sex: although the proportion of cases diagnosed through emergency presentation was higher in females, this was not significantly different to the proportion for males. There were no significant differences between males and females for TWW and GP referrals.



Age: emergency presentation generally increased with increasing age with a 22% difference between those aged over 85 and those aged under 50, however, TWW and GP referral were lower among the youngest age groups and the oldest age groups.

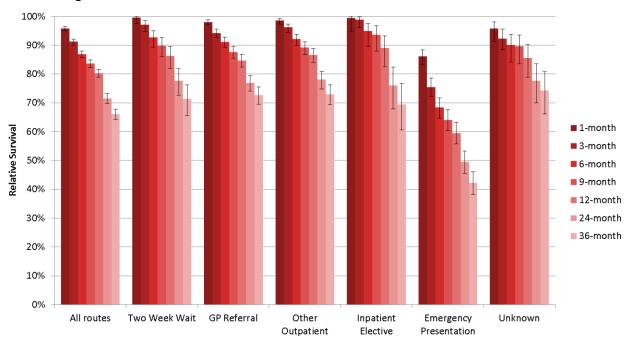


Deprivation: across all routes to diagnosis, there were no significant differences between those living in the least deprived areas compared with those living in the most deprived areas.



Survival results for sarcoma: bone cancer, 2006 to 2013

Survival for patients diagnosed through emergency presentation was significantly lower than all other routes to diagnosis: ranging from 86% at one month to 42% at three years after diagnosis.



Find out more:

This report forms part of a suite of publications from NCIN's Routes to Diagnosis project: www.ncin.org.uk/publications/routes_to_diagnosis

Other useful resources within the NCIN partnership:

What cancer statistics are available and where can I find them? www.ncin.org.uk/publications/reports

Public Health England's National Cancer Intelligence Network (NCIN) is a UK-wide initiative, working to drive improvements in cancer awareness, prevention, diagnosis and clinical outcomes by improving and using the information collected about cancer patients for analysis, publication and research.

www.gov.uk/governmalest/organisations/public-health-england

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